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CONFIRMATION NO. 5020

SERIAL NUMBER	FILING OR 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/680,533	10/06/2003 RULE	132	3732	

APPLICANTS

Ming Lai, Dublin, CA;
Meijuan Yuan, Dublin, CA;

**** CONTINUING DATA ***************************

This appln claims benefit of 60/422,184 10/29/2002 and claims benefit of 60/431,466 12/05/2002

PAR

**** FOREIGN APPLICATIONS *********************

N/A PAR

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
** 12/31/2003

Foreign Priority claimed	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
☐ yes ☑ no	CA	10	20	3
35 USC 119 (a-d) conditions met ☐ yes ☐ no ☐ Met after Allowance				
Verified and Acknowledged Examiner's Signature Rachel A Rummy PAR Initials				

ADDRESS

Ming Lai
P.O. Box 90509
Rochester, NY90509

TITLE

Combined dental flosser and toothbrush

FILING FEE RECEIVED	FEES: Authority has been given in Paper
385	No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:

- ☐ All Fees
- ☐ 1.16 Fees (Filing)
- ☐ 1.17 Fees (Processing Ext. of time)
- ☐ 1.18 Fees (Issue)
- ☐ Other _____
- ☐ Credit